



ORIGINAL
RED

Home and Well Survey

Resident's Name: **Ex. 6 - Personal Privacy**

Home Phone: **Ex. 6 - Personal Privacy** Cell Phone: N/A

Address: **Ex. 6 - Personal Privacy**

Email address: _____

Owner Information (If Different): THIS IS OUR BUCKS CO. ADDRESS
where we live

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Number of Household Residents/Age Groups: **Ex. 6 - Personal Privacy**

Infants (Under Age 1) _____ Toddlers (Age 1-6) _____

Children (Age 7-12) _____ Adolescents (Age 13-18) _____

Adults (Age 18-65) _____ Seniors (Age 66+) _____

Do you have a water treatment system? If so, please identify the components of the system (if any): THIS IS MESHOppen RR DIMOCK Twp. 2nd Residence

Well Information:

Type: Dug ☐ Drilled ☒ Well Depth: 175' Well Age: 3-89

Driller log of the well installation (these are the detailed notes that the driller takes during the installation): _____

Name of Driller/Service Company (If Known): OUT OF BUSINESS

Total depth of well: 175'

Depth of surface casing: 92' Cement on Surface casing: Yes ☐ No ☐

Length/Depth of Screen (the screened interval of the well): _____

Depth of pump in relation to total depth of the well: _____

Well Repairs or Re-drilling in past 15 years: NONE

Have you had your well water tested for contamination in the past? yes

If so, and you would be willing to share your results with the EPA, what contaminants have been found in your well historically? yes

Split OK

Home and Well Survey

Recent or past changes in water quality (taste, odor, appearance): _____

Do you currently use your well water for drinking? Yes ☐ No ☒

Cooking? Yes ☐ No ☒

Bathing? Yes ☒ No ☐

Other household uses? OUT DOOR WATERING

If you do not use your well water, what water source do you use? _____

Have you been provided an alternate source of water for drinking/cooking? Yes ☐ No ☐

Other uses? Yes ☐ No ☐

When did this occur? _____

If so, who provides/provided the alternate water? _____

Is there an agreement with the provider? yes

What event/condition prompted the use of alternate water? _____

When did this occur? _____

Lease with gas company: Yes ☒ No ☐

If so, what is the status of lease: CONTRACT Signed 1-08

Is there any additional information you would like to provide to us: THE DIMOCK WELL WAS

TESTED IN THE YEAR 2010 BY D.E.P. SCRANTON OFFICE

BY MIKE O DONNELL THEY SHOULD HAVE ALL TEST RECORDS

CABOT & HIS CONTRACTORS INSTALLED A TREATMENT SHED

AND A REVERSE OSMOSIS UNIT AT KITCHEN SINK FOR DRINKING

WATER & COOKING. TEST RESULTS UNKNOWN TO ME AT

THIS TIME AS TREATMENT SHED HAS NOT OFFICIALLY BEEN

TURNED OVER TO US.

ANY QUESTIONS CALL AND I WILL EXPLAIN FURTHER

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